

# Washington Metropolitan Area Transit Commission

## 2010 Carrier Annual Report Form

### PLEASE NOTE:

- Each carrier holding a WMATC certificate of authority on January 1, 2010, must file a complete 2010 annual report and pay a \$150 annual fee on or before **February 1, 2010**. To be timely, the report and fee must be received at WMATC's office by this date.
- Incomplete annual reports will not be accepted. All fields marked with an asterisk (\*) must be completed. If any information is missing or incorrect, make all necessary corrections.
- Each carrier that fails to file a complete annual report on time will be assessed a **\$100 late fee**. Each carrier that fails to pay the \$150 annual fee on time will be assessed a separate **\$100 late fee**.
- The WMATC operating authority of each carrier that has not filed a complete annual report and paid its annual fee and any assessed late fees will be automatically suspended effective May 4, 2010.
- Filing an annual report containing false information, or omitting information, may result in the assessment of a civil forfeiture.

### 1. ANNUAL REPORT OF:

545 | A La Carte, Inc., t/a A La Carte Limo & Sedan  
\*WMATC No. | \*Name of Carrier (as shown on certificate of authority)

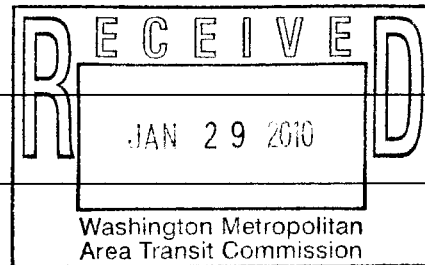
10320 Mountington Court, Vienna, VA 22182-1835

\*Street Address of Principal Place of Business

P.O. Box 16293, Washington, DC 20041-6293

Mailing Address (if different from street address)

(571) 437-5256 | (703) 478-0821 | rghannam@alacartelimo.com  
\*Telephone Number | Other Telephone | Fax Number | E-mail



### 2. CARRIER CONTACT PERSON (at mailing address to whom we should direct inquiries):

Mr. Rifat Abu-Ghannam | Director  
\*Name | \*Title  
(703) 242-8833 | (703) 478-0821 | rghannam@alacartelimo.com  
\*Telephone Number | Other Telephone | Fax Number | E-mail

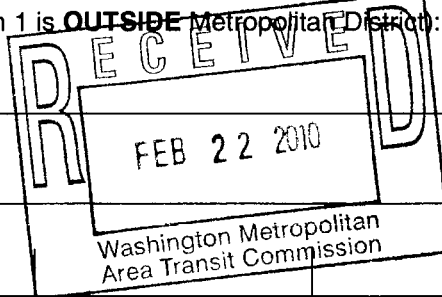
### 3. REGISTERED AGENT INSIDE THE METROPOLITAN DISTRICT FOR SERVICE OF PROCESS

\*(Complete **ONLY** if Street Address in item 1 is **OUTSIDE** Metropolitan District)

Name of Registered Agent for Service of Process

Street Address

Telephone Number | Other Telephone | Fax Number | E-mail



(continued on next page)

**Washington Metropolitan Area Transit Commission****2010 Annual Report: Revenue Vehicle List**

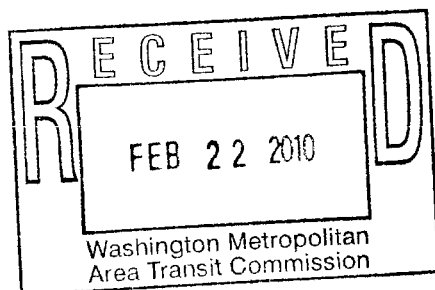
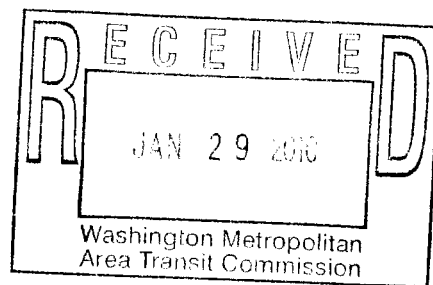
Name: A La Carte, Inc.

Trade Name: A La Carte Limo &amp; Sedan

**Carriers are required to provide a complete list of revenue vehicles used in WMATC operations. You may choose from the following options: (1) list your vehicles in the space provided on page 2 of the annual report form; (2) make any necessary corrections to this list and submit it with your annual report; or (3) attach your own vehicle list. Failure to report revenue vehicles may result in a civil forfeiture.**

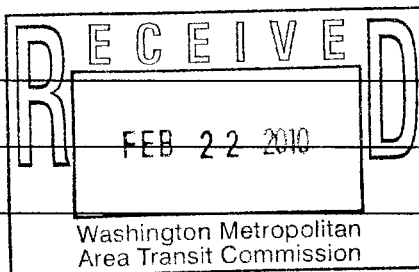
☐ Check this box if all information on this list is complete and accurate.

Fleet No.	*Model Year	*Make	*VIN (17 digits)	*Plate	*State Registered	*Capacity
	<del>2003</del>	<del>Lincoln</del>	<del>1LNHM81W63Y629918</del>	<del>452HAB</del>	<del>VA</del>	<del>5</del>
	2005	Lincoln	1LNHM81W55Y627208	945HAA	VA	5
	2004	Lincoln	1LNHM81W54Y686659	934HAA	VA	5
	<del>2002</del>	<del>Chevrolet</del>	<del>1G6KD54X02U133253</del>	<del>H502910</del>	<del>VA</del>	<del>5</del>
	<del>2004</del>	<del>Lincoln</del>	<del>1LNHM81W44Y644936</del>	<del>H511475</del>	<del>VA</del>	<del>5</del>
	<del>2002</del>	<del>Cadillac</del>	<del>1G6KD54YX2U135219</del>	<del>920HAB</del>	<del>VA</del>	<del>5</del>
103	2003	Ford	1FBSS31LV3HC02822	H507265	VA	15
<del>104</del>	<del>2004</del>	<del>Ford</del>	<del>1FMFU16L04LB59316</del>	<del>927HAA</del>	<del>VA</del>	<del>7</del>
<del>105</del>	<del>1999</del>	<del>GMC</del>	<del>1GKFK16R7XJ749046</del>	<del>H502807</del>	<del>VA</del>	<del>7</del>



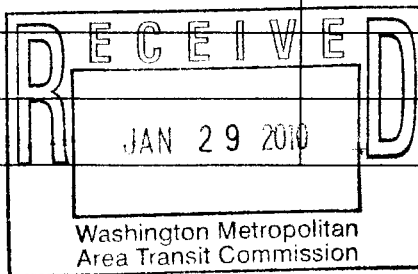
4. **\*CHANGES:** Describe any merger, consolidation or other change in management, ownership, control, or form of organization that occurred after the previous year's annual report was filed, or if not applicable, after the carrier's certificate of authority was issued. If no changes are entered below, the carrier certifies that no such changes have occurred.

N/A



5. **\*LIST OF REVENUE VEHICLES USED IN WMATC OPERATIONS:** Choose one of the following three options: (1) list your vehicles below; (2) make any necessary corrections on the enclosed vehicle list and return it with this form; or (3) attach your own vehicle list. Include all required information.

Fleet No. (if applicable)	*Model Year	*Make	*Vehicle VIN (17 digits)	*License Plate Number	*State Registered	*Seating Capacity
101	2007	chevy.	3GNFK16Y27G296417	949HAA	va	7
	2007	Lincoln	1LNHM81VX7Y636237	950HAA	va	5
	2007	Lincoln	1LNHM82V37Y615678	405HAB	va	5
107	2005	Ford	1FBSS31LX5HB47145	H516514	va	15
	2007	Lincoln	1LNHM81V27Y628648	571-HAE	va	5
	2007	Lincoln	1LNHM84W07Y615594	H516827	va	5



6. **\*CERTIFICATION:**

I certify that this report, including any attachments, was prepared by me or under my supervision, that I have examined it, and that the information contained in it is true, correct, and complete as of this date.

Rifat Abu-Ghannam

\*Name (Type or Print)

Director

\*Title

\*Signature

1/28/10

\*Date

(end)